



TRICARE
MANAGEMENT ACTIVITY

PDR

**OFFICE OF THE ASSISTANT SECRETARY OF DEFENSE
HEALTH AFFAIRS**

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**THE DIRECTOR, OCHAMPUS, HAS AUTHORIZED THE FOLLOWING CHANGE(S) TO OCHAMPUS
MANUAL 6010.49-M, REISSUED JULY 1992:**

PAGE CHANGE(S): PART THREE: Chapter 4

REMOVE AND INSERT PAGE(S): (See page 2 of this transmittal)

SUMMARY OF CHANGE(S): THIS CHANGE PROVIDES THE PROCEDURES FOR PROCESSING TRICARE PRIME
REMOTE ENROLLMENTS IN REGIONS 1, 2 AND 5 ONLY. THIS CHANGE IS ISSUED IN CONJUNCTION
WITH ADP MANUAL CHANGE 71.

EFFECTIVE DATE AND IMPLEMENTATION: UPON DIRECTION OF THE CONTRACTING OFFICER.

Sheila H. Sparkman
Director, Program Development and Evaluation

**ATTACHMENT(S): 5 PAGE(S)
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Part Three

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CHAPTER 4

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Marketing, Enrollment and Support Services

Chapter

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Marketing, Enrollment and Support Services

II.G.6.

back to the first contract area of enrollment for the enrollment year: (1) TRICARE Prime enrollees in beneficiary categories required to pay enrollment fees (e.g., retirees, retiree family members, etc.) and (2) TRICARE/Medicare eligible enrollees who are not active duty family members. "Within-contract" enrollment transfers are not limited. When TRICARE Prime enrollment changes from one contractor to another prior to the annual renewal for enrollees in beneficiary categories required to pay enrollment fees, future unpaid enrollment fees, such as those paid on a quarterly basis, will be due the gaining contractor. There will be no transfer of funds between contractors, and, if the enrollee relocates to an area where TRICARE Prime is not offered, there shall be no refund of the unused portion of the enrollment fee.

Note:

Effective March 26, 1998, the enrollment fee is waived for those beneficiaries who are eligible for Medicare on the basis of disability or end stage renal disease and who maintain enrollment in Part B of Medicare.

H. Split Enrollment

NOTE:

In some Managed Care Regions, the Lead Agent is responsible for administering split enrollment provisions. Wherever the term "contractor" is used in this section, the term "lead agent" may be applied where appropriate. The term "contractor" also applies to a Uniformed Services Family Health Plan (USFHP) designated provider. Split enrollment provisions apply only to USFHP enrollees who are CHAMPUS-eligible.

Split enrollment involves different members of the same family enrolled with different TRICARE contractors (MCS contractors/Lead Agents/USFHP designated providers), e.g., the sponsor and spouse live and are enrolled in Prime in TRICARE MCS Region 7 and a college age child lives and is enrolled in Prime in Alaska; or it may involve one or more CHAMPUS-eligible USFHP enrollees and other members of the same family enrolled with one or more MCS contractors. "Split enrollment" provisions apply to TRICARE Prime enrollments in all areas, including CONUS, Europe, South America, Pacific, Tidewater, Alaska, etc. Until the implementation of a national enrollment year catastrophic cap file similar to the Central Deductible and Catastrophic Cap File (CDCF), each contractor shall maintain and track enrollment fees, copayments, and other TRICARE enrollee information for the family members enrolled in its own area. If contractors are notified that the catastrophic cap has been met or exceeded or that more than two family members are enrolled, contractors shall follow the procedures in TRICARE/CHAMPUS Policy Manual, Chapter 12, Section 7.3, paragraph F., to change the enrollment status from single to family enrollment with the same enrollment anniversary for all family members. All catastrophic cap accumulations shall be applied to the new enrollment period.

1. Active duty family members have no annual enrollment fee and each may enroll with the contractor providing care in his or her area.

For retirees, their family members, and other enrollees in beneficiary categories required to pay enrollment fees, a family will pay enrollment fees totaling no more than the TRICARE Prime family enrollment fee regardless of the enrollment locations of family members. If the family enrollment fee is not paid on time and the family is disenrolled, individual family members who are enrolled in different regions (and who have

not paid single enrollment fees) shall be disenrolled as well. Such disenrolled individuals (previously not required to pay enrollment fees) shall be offered the opportunity to enroll in Prime in their own areas with no penalty.

2. Until the Department of Defense establishes the national enrollment year catastrophic cap file, contractors shall notify enrollees who have family members enrolled with different contractors that the family must monitor combined enrollment year catastrophic cap accumulations since the enrollment year catastrophic cap accumulations are maintained separately by each contractor. Someone must notify one of the contractors that the family's combined accumulations have met or exceeded the enrollment year catastrophic cap. The first contractor notified shall be the "lead" contractor for the purposes of verifying accumulations and notifying other affected contractors. When combined enrollment year catastrophic cap accumulations meet the enrollment year catastrophic cap, then no enrolled family member, regardless of enrollment region, shall be required to pay TRICARE Prime enrollment fees or copayments for the remainder of the enrollment year.

3. The lead contractor shall request verification of family member enrollment year catastrophic cap accumulations from the other affected contractors within four (4) working days of notification that the catastrophic cap has been met (e.g., claims recapitulations). The other affected contractors shall provide requested information regarding catastrophic cap accumulations to the lead contractor within four (4) working days of the request. The lead contractor shall verify accumulations, and, if the cap has been met/exceeded, the lead contractor shall notify the other affected contractors within three working days that the family member(s) enrolled within the other contractors' regions are no longer required to pay Prime copayments or enrollment fees for the remainder of the enrollment year. The lead contractor shall also provide all necessary information (e.g., copies of claims recapitulations from all contractors involved) so that contractor(s) may determine if overpayments have been made. The appropriate contractor(s) shall refund overpayments to the enrollee(s) who made the overpayment(s).

4. Contractors shall continue to maintain and monitor Fiscal Year catastrophic cap accumulations for enrolled and nonenrolled families as required in TRICARE/CHAMPUS Policy Manual, Chapter 13, Section 14.1 As with nonenrolled beneficiaries, once the Fiscal Year cap has been met for an enrolled individual or family, the contractor shall ensure that beneficiaries pay no more Prime copayments or other applicable out-of-pocket expenses for the rest of the Fiscal Year.

I. Procedures for TRICARE Prime Remote Enrollment in Regions 1, 2, and 5 Only

The Managed Care Support (MCS) contractor shall process enrollments for all TRICARE Prime Remote beneficiaries on the CHCS hosts designated by the Lead Agent through the CHCS-MCP Enrollment sub-module. The contractor shall comply with current TRICARE and DoD policy as well as with the requirements of the Lead Agent and MTF for enrolling active duty service members and other beneficiaries in TRICARE Prime on CHCS-MCP. All TRICARE and DoD policies, including those involving enrollment effective dates, apply unless otherwise specified in this section. The contractor shall also comply with Lead Agent and MTF commander requirements established by contract.

Marketing, Enrollment and Support Services

II.I.1.

1. PCM Assignment

The contractor shall assign a civilian network Primary Care Manager (PCM) to each beneficiary at the time of enrollment in TRICARE Prime Remote according to Lead Agent and MTF commander direction.

a. For active duty service members (ADSMs), the contractor shall process PCM assignments and updates on CHCS-MCP using the DMIS identification (ID) number of "8XXX", the Alternate Care Value of "A," and PCM Location Code of "01."

b. For active duty family members, retirees, retiree family members, and others allowed to enroll in TRICARE Prime in a remote location, the contractor shall process PCM assignments and updates on CHCS-MCP using the DMIS ID number of "8XXX," and Alternate Care Value of "E."

2. Provider Files

The Regions 1, 2, and 5 Managed Care Support (MCS) contractors shall maintain the civilian provider file according to contractual requirements.

NOTE:

Enrollment portability provisions do not apply to active duty service members.

J. Disenrollment

1. All enrollees shall have the opportunity to disenroll during the annual re-enrollment period which occurs after twelve (12) months of continuous enrollment. Enrollees may disenroll when they move without a twelve (12) month lockout period. Any move, either within or outside the contract area, qualifies.

2. If an enrollee who is not moving and who has not completed 12 months of continuous enrollment requests disenrollment, MTF Commanders (for catchment area residents) shall approve such requests on a case-by-case basis. MTF Commanders or, when applicable, the Lead Agent, will coordinate a request for early disenrollment with the contractor to assure disenrollment is effective on DEERS. The contractor shall maintain a log of the reasons for disenrollment and provide the information to the Lead Agent. There shall be no refunds of paid enrollment fees (with one exception, see paragraph F.6. above); however, the enrollee is not obligated to pay the remaining quarterly fees. Beneficiaries who have not moved and who disenroll from TRICARE Prime before the enrollment anniversary (with the exception of retirees who are recalled to active duty and their family members) and beneficiaries who are disenrolled because of failure to pay enrollment fees shall not be eligible for reenrollment for twelve (12) months.

